

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. **16774136**
APPLICANT(S)

FILED DATE

9/28/05

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1		1		
9		1				
10	1		1			
11		1		1		
12		2		2		
13		2		2		
14		2		2		
15	1		1			
16		1		1		
17		1		1		
18		1		1		
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41			1			
42						
43						
44						
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48						
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50						
TOTAL IND.	3		5			
TOTAL DEP.		48		31		
TOTAL CLAIMS	48		36			

	IND	DEP	IND	DEP	IND	DEP
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TOTAL DEP.						
TOTAL CLAIMS						